

## HUMAN SERVICES DEPARTMENT[441]

### Adopted and Filed

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services amends Chapter 75, “Conditions of Eligibility,” Iowa Administrative Code.

The purpose of this amendment is to revise Medicaid eligibility rules for the Iowa Family Planning Network. Specifically, this amendment:

1. Deletes the requirement concerning health insurance coverage.
2. Deletes the requirement concerning HAWK-I coverage.
3. Revises the maximum income standard to reflect the Modified Adjusted Gross Income (MAGI) deduction of 5 percent of the gross income effective January 1, 2014.

This amendment allows Iowa residents to qualify for the Iowa Family Planning Network when:

- They have other health insurance coverage.
- They are covered by the HAWK-I program.
- Their MAGI is 305 percent of the federal poverty level for their household size.

Notice of Intended Action was published in the Iowa Administrative Bulletin as **ARC 0746C** on May 15, 2013.

The Department held five public hearings on this amendment on June 4, June 5, and June 6, 2013. Through the course of the hearings and the comment period, the Department received only two comments, both of which supported the proposed amendment.

This amendment is identical to that published under Notice of Intended Action.

The Council on Human Services adopted this amendment on August 14, 2013.

This amendment does not provide for waivers in specific situations because all members should be subject to the same eligibility requirements. Requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

This amendment is intended to implement Iowa Code section 249A.4.

This amendment will become effective January 1, 2014.

The following amendment is adopted.

Amend paragraph **75.1(41)“a”** as follows:

*a. Eligibility.* The following are eligible for assistance under this coverage group if they are ~~uninsured or have health insurance that does not include family planning services~~, are not otherwise enrolled in Medicaid (other than IowaCare), ~~and are not enrolled in the Children’s Health Insurance Program (HAWK-I)~~:

(1) Women who were Medicaid members when their pregnancy ended and who are capable of bearing children but are not pregnant. Eligibility for these women extends for 12 consecutive months after the month when their 60-day postpartum period ends.

(2) Women who have reached childbearing age, are under 55 years of age, are capable of bearing children but are not pregnant, and have income that does not exceed ~~300~~ 305 percent of the federal poverty level, as determined according to paragraph 75.1(41)“c.”

(3) Men who are under 55 years of age, who are capable of fathering children, and who have income that does not exceed ~~300~~ 305 percent of the federal poverty level, as determined according to paragraph 75.1(41)“c.”

[Filed 8/14/13, effective 1/1/14]

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EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 9/4/13.